

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

Full Name (Last, First, Middle Initial)

A. Stephen J Incavo MD

Mailing Address 3118 Quenby Avenue

City

Houston

State

TX

Zip Code

77005

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Methodist Hospital

Occupation

Orthopaedic Surgeon

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 19 / 2013

Transaction ID : 5332655

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Robert Allen Mileski MD

Mailing Address 8555 E Voltaire

City

Scottsdale

State

AZ

Zip Code

85260

FEC ID number of contributing
federal political committee.

C

Name of Employer

Phoenix Orthopedic Group

Occupation

Orthopaedic Surgeon

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 19 / 2013

Transaction ID : 5332656

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Jay M Lipke MD

Mailing Address 10301 Kanis Rd

City

Little Rock

State

AR

Zip Code

72205-6205

FEC ID number of contributing
federal political committee.

C

Name of Employer

OrthoArkansas Physicians

Occupation

Orthopaedic Surgeon

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 19 / 2013

Transaction ID : 5332657

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1650.00